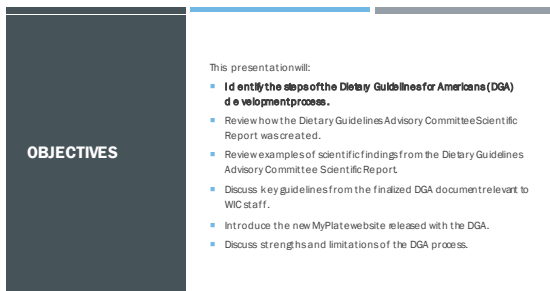


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3

#### TIMELINE FOR DEVELOPMENT OF THE 2020-2025 DGA



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## OBJECTIVES

This presentation will:

- Identify the steps of the Dietary Guidelines for Americans (DGA) development process.
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## CREATION OF THE 2020 DIETARY GUIDELINES ADVISORY COMMITTEE (DGAC) SCIENTIFIC REPORT

- USDA and HHS identified topics and scientific questions to be examined in the development of the 2020-2025 DGA.
  - Intended to improve transparency
  - Topics and questions were refined based on public and agency input
  - Some questions were chosen to create an opportunity to re-evaluate the evidence behind federal guidelines
- DGAC was broken into subcommittees including:
  - Dietary Patterns
  - Pregnancy and Lactation
  - Born to 24 Months
  - Beverages and Alcohol Signs
  - Dietary Fats and Seafood
  - Frequency of Eating
  - Data Analysis and Food Pattern Modeling (cross-cutting working group)



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## CREATION OF THE 2020 DIETARY GUIDELINES ADVISORY COMMITTEE (DGAC) SCIENTIFIC REPORT

- Each question was answered by synthesizing results from these three approaches:
  - Data analysis using federal data sources: NHANES, NHIS, SEER
  - Food pattern modeling: if we change a dietary pattern in a certain way, how might we change the nutrient intake/health of Americans?
  - Systematic review supported by the Nutrition Evidence Systematic Review (NESR) team within the USDA
- Based on the amount of evidence supporting the answer to each question, many were given a grade of limited, moderate, or strong evidence.

### LIST OF QUESTIONS

- What is the relationship between dietary patterns consumed during pregnancy and risk of gestational diabetes mellitus?
- What is the relationship between dietary patterns consumed during pregnancy and risk of hypertensive disorders during pregnancy?
- What is the relationship between dietary patterns consumed during pregnancy and gestational weight gain?

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## CREATION OF THE 2020 DIETARY GUIDELINES ADVISORY COMMITTEE (DGAC) SCIENTIFIC REPORT

Table C-3. Definitions of grades used by NESR for the 2020 Committee

Grade	Definition
<b>Strong</b>	The conclusion statement is based on a strong body of evidence as assessed by risk of bias, consistency, directness, precision, and generalizability. The level of certainty in the conclusion is strong, such that if new evidence emerges, modifications to the conclusion are unlikely to be required.
<b>Moderate</b>	The conclusion statement is based on a moderate body of evidence as assessed by risk of bias, consistency, directness, precision, and generalizability. The level of certainty in the conclusion is moderate, such that if new evidence emerges, modifications to the conclusion may be required.
<b>Limited</b>	The conclusion statement is based on a limited body of evidence as assessed by risk of bias, consistency, directness, precision, and generalizability. The level of certainty in the conclusion is limited, such that if new evidence emerges, modifications to the conclusion are likely to be required.
<b>Grade Not Assignable</b>	A conclusion statement cannot be drawn due to either a lack of evidence, or evidence that has severe limitations related to risk of bias, consistency, directness, precision, and/or generalizability.

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## FINDINGS FROM THE DGAC SCIENTIFIC REPORT – PREGNANCY AND LACTATION

- Proposed nutrients of public health concern
  - Iron (pregnant women)
  - Vitamin D
  - Calcium
  - Dietary fiber
  - Potassium
  - Sodium
  - Saturated fat
  - Added sugars
- Nutrients that pose special challenges:
  - Iodine – may be inadequate depending on daily consumption, supplement use, and intake of cruciferous vegetables (high in goitrogens)
  - Folate – should remain of concern due to high risk of congenital anomalies if inadequate
  - Choline – needs more research
  - Magnesium – needs more research

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## FINDINGS FROM THE DGAC SCIENTIFIC REPORT – PREGNANCY AND LACTATION

- Limited evidence suggests that certain dietary patterns...
  - before pregnancy:** may be associated with a reduced risk of gestational diabetes mellitus.
  - before and during pregnancy:** may be associated with a reduced risk of hypertensive disorders of pregnancy, including preeclampsia and gestational hypertension.
  - during pregnancy:** may be associated with a lower risk of preterm birth and spontaneous preterm birth, lower risk of excessive gestational weight gain during pregnancy.

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With some variation, depending on which question was asked, the healthy patterns identified are **higher in vegetables, fruits, nuts, legumes, fish, and whole grains and lower in added sugar, red and processed meat, and fried foods.**

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## FINDINGS FROM THE DGAC SCIENTIFIC REPORT – PREGNANCY AND LACTATION

- Moderate evidence indicates that seafood intake **during pregnancy** is associated favorably with measures of cognitive development in young children.
- Limited evidence suggests that seafood intake **during pregnancy** may be associated favorably with measures of language and communication development in the child.
- Limited evidence suggests that omega-3 fatty acid supplementation **during pregnancy** may result in favorable cognitive development in the child.

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## FINDINGS FROM THE DGAC SCIENTIFIC REPORT – PREGNANCY AND LACTATION

- There is very little or no evidence to determine relationships between maternal dietary patterns **during lactation** and:
  - Human milk quantity
  - Quantity of various macro- and micronutrients in breastmilk
  - Developmental outcomes in children
- Limited evidence suggests that maternal consumption of diets higher in fat (>35 percent fat) and lower in carbohydrate **during lactation** may be related to higher total fat in human milk collected after a meal (postprandial period).

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## OBJECTIVES

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## KEY MESSAGES PUBLISHED IN THE 2020-2025 DGA



- Follow a healthy dietary pattern at every life stage.**
  - It is never too early or too late to eat healthfully.
- Customize and enjoy nutrient-dense food and beverage choices to reflect personal preferences, cultural traditions, and budgetary considerations.**
  - A healthy dietary pattern can benefit all individuals regardless of age, race, ethnicity, or current health status.
  - Customize this framework to individual needs and preferences, as well as the foodways of the diverse cultures in the United States.
  - See Figure 1-5 on pages 28 and 29 of the DGA document.
- Focus on meeting food group needs with nutrient-dense foods and beverages, and stay within calorie limits.**
- Limit foods and beverages higher in added sugars, saturated fat, and sodium, and limit alcoholic beverages.**
  - A small amount of added sugars, saturated fat, or sodium can be added to nutrient-dense foods and beverages to help meet food group recommendations, but foods and beverages high in these components should be limited.

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## DGA RECOMMENDATIONS FOR INFANTS AND YOUNG CHILDREN

### Dietary Patterns

- As infants wean from human milk or infant formula, transition to a healthy dietary pattern.
- Foods and beverages should be rich in nutrients and stay within defined limits of dietary components for added sugars and sodium.

### Added Sugars and Dietary Fats in Milk

- Flavored milks are not advised for children aged 12 through 23 months due to added sugar content.
- For children 24 months and older, nutrient-dense dairy options such as unweetened, fat-free and low-fat (1%) milk, yogurt, cheese, fortified soy beverage, and low-fat cheese and lactose-free dairy products are recommended.

## DGA RECOMMENDATIONS FOR INFANTS AND CHILDREN

Table 3-1  
Healthy U.S.-Style Dietary Pattern for Toddlers Ages 12 Through 23 Months Who Are No Longer Receiving Human Milk or Infant Formula, With Daily or Weekly Amounts From Food Groups, Subgroups, and Components

FOOD GROUP OR COMPONENT <sup>a</sup>	CALORIE LEVEL OF PATTERN			
	1,000	1,200	1,400	1,600
<b>VEGETABLES (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2
Dark Green Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4
Red and Orange Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4
Beans, Peas, Lentils (cup-equivalents)	1/2	3/4	1	1 1/4
Starchy Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4
Other Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4
<b>FRUIT (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2
Whole Fruits (cup-equivalents)	1/2	3/4	1	1 1/4
Softened Fruits (cup-equivalents)	1/2	3/4	1	1 1/4
<b>DAIRY (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2
Whole Dairy (cup-equivalents)	1/2	3/4	1	1 1/4
Softened Dairy (cup-equivalents)	1/2	3/4	1	1 1/4
<b>PROTEIN (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2
Meats, Poultry, Eggs (cup-equivalents)	1/2	3/4	1	1 1/4
Beans, Peas, Lentils (cup-equivalents)	1/2	3/4	1	1 1/4
Softened Soybeans (cup-equivalents)	1/2	3/4	1	1 1/4
<b>GRAIN (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2
Whole Grains (cup-equivalents)	1/2	3/4	1	1 1/4
Softened Grains (cup-equivalents)	1/2	3/4	1	1 1/4
<b>OTHER (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2
Other Foods (cup-equivalents)	1/2	3/4	1	1 1/4

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## DGA RECOMMENDATIONS FOR INFANTS AND CHILDREN

Table 3-1  
Healthy U.S.-Style Dietary Pattern for Children Ages 4 Through 8, With Daily or Weekly Amounts From Food Groups, Subgroups, and Components

FOOD GROUP OR COMPONENT <sup>a</sup>	CALORIE LEVEL OF PATTERN					
	1,000	1,200	1,400	1,600	1,800	2,000
<b>VEGETABLES (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2	3	3 1/2
Dark Green Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Red and Orange Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Beans, Peas, Lentils (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Starchy Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Other Vegetables (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
<b>FRUIT (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2	3	3 1/2
Whole Fruits (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Softened Fruits (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
<b>DAIRY (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2	3	3 1/2
Whole Dairy (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Softened Dairy (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
<b>PROTEIN (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2	3	3 1/2
Meats, Poultry, Eggs (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Beans, Peas, Lentils (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Softened Soybeans (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
<b>GRAIN (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2	3	3 1/2
Whole Grains (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
Softened Grains (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4
<b>OTHER (cup-equivalents)<sup>b</sup></b>	1	1 1/2	2	2 1/2	3	3 1/2
Other Foods (cup-equivalents)	1/2	3/4	1	1 1/4	1 1/2	1 3/4

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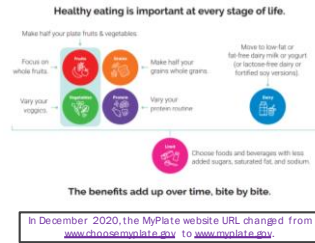
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## USING MYPLATE TO SUPPORT THE DIETARY GUIDELINES



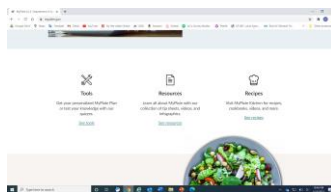
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## USING MYPLATE TO SUPPORT THE DIETARY GUIDELINES



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## USING MYPLATE TO SUPPORT THE DIETARY GUIDELINES



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## STRENGTHS AND LIMITATIONS OF THE DGA PROCESS

- **Strengths**
  - Based on rigorous research
  - DGAC Scientific Report is drafted by nutrition science experts at the top of their field
  - Focuses on dietary patterns instead of individual nutrients
  - Allows for public comment
  - Considers the "cobas effect" of adding/removing certain nutrients or components of dietary patterns
  - Will guide new research in our field over the next 5 years.
- **Limitations**
  - Assesses dietary patterns to prevent chronic disease, but not how to manage chronic disease.
  - Lack of data for underrepresented groups (based on race, ethnicity, and/or life stage) limits the potential of the DGA to guide professionals in serving these people.
    - See "Future Directions" in the DGAC Scientific Report
  - The DGAC was required to answer only the questions designated by the USDA/HHS in their scientific report.

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## QUESTIONS?



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## SOURCES

- U.S. Department of Agriculture and U.S. Department of Health and Human Services. Dietary Guidelines for Americans, 2020-2025. 9th Edition. December 2020. Available at [DietaryGuidelines.gov](https://www.dietaryguidelines.gov).
- Dietary Guidelines Advisory Committee. 2020. Scientific Report of the 2020 Dietary Guidelines Advisory Committee. Advisory Report to the Secretary of Agriculture and the Secretary of Health and Human Services. U.S. Department of Agriculture, Agricultural Research Service, Washington, DC.
- DGA Website: <https://www.dietaryguidelines.gov/>
- MyPlate Website: <https://www.myplate.gov/>

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